

VILLAGE OF AKRON

UTILITY PAYMENT AUTHORIZATION

Name	Phone#	
Property Address		
Mailing Address		
I hereby authorize the	Name of Bank	deduct funds from:
Checking Account	Routing # Acce	t#
Savings Account	Routing #Acct	#
to pay my Village of A beginning on		d refuse payments
I understand that this payment will be treated as a regular check, subject to all regular service charges and overdraft fees.		
	Signature	Date
	Village Approval	Date